

<i>SERFF Tracking Number:</i>	<i>LWLL-126773344</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Protective Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46674</i>
<i>Company Tracking Number:</i>	<i>0289201001</i>		
<i>TOI:</i>	<i>H07I Individual Health - Specified Disease - Limited Benefit</i>	<i>Sub-TOI:</i>	<i>H07I.002A Dread Disease - Cancer Only</i>
<i>Product Name:</i>	<i>Individual Cancer</i>		
<i>Project Name/Number:</i>	<i>Individual Cancer/0289201001</i>		

Filing at a Glance

Company: Protective Life Insurance Company

Product Name: Individual Cancer

SERFF Tr Num: LWLL-126773344 State: Arkansas

TOI: H07I Individual Health - Specified Disease - Limited Benefit

SERFF Status: Closed-Approved-Closed
State Tr Num: 46674

Sub-TOI: H07I.002A Dread Disease - Cancer Only

Co Tr Num: 0289201001

State Status: Approved-Closed

Filing Type: Rate

Author: Brian Stentz

Reviewer(s): Rosalind Minor

Date Submitted: 08/31/2010

Disposition Date: 10/25/2010

Disposition Status: Approved-Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: Individual Cancer

Project Number: 0289201001

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 10/25/2010

Status of Filing in Domicile: Authorized

Date Approved in Domicile: 07/29/2010

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 10/25/2010

Created By: Brian Stentz

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Brian Stentz

Filing Description:

Rate increase for supplemental cancer policies providing coverage for cancer related expenses, including unlimited radiation & chemotherapy.

Company and Contact

Filing Contact Information

Brian Stentz, Actuary

bstentz@lewisellis.com

SERFF Tracking Number: LWLL-126773344 State: Arkansas
Filing Company: Protective Life Insurance Company State Tracking Number: 46674
Company Tracking Number: 0289201001
TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only
Limited Benefit
Product Name: Individual Cancer
Project Name/Number: Individual Cancer/0289201001

P.O. Box 851857 972-850-0850 [Phone]
2929 N. Central Expy.,Ste. 200 972-850-0851 [FAX]
Richardson, TX 75805-1857

Filing Company Information

(This filing was made by a third party - lewisandellisincorporated2)

Protective Life Insurance Company	CoCode: 68136	State of Domicile: Tennessee
P.O. Box 2606	Group Code: 458	Company Type:
Birmingham, AL 35202	Group Name:	State ID Number:
(800) 265-1545 ext. 3211[Phone]	FEIN Number: 63-0169720	

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Protective Life Insurance Company	\$50.00	08/31/2010	39150657

SERFF Tracking Number:	LWLL-126773344	State:	Arkansas
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Product Name:	Individual Cancer		
Project Name/Number:	Individual Cancer/0289201001		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	10/25/2010	10/25/2010

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Rosalind Minor	10/01/2010	10/01/2010	Brian Stentz	10/14/2010	10/14/2010
Pending Industry Response	Rosalind Minor	09/08/2010	09/08/2010	Brian Stentz	09/17/2010	09/17/2010

<i>SERFF Tracking Number:</i>	<i>LWLL-126773344</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Protective Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46674</i>
<i>Company Tracking Number:</i>	<i>0289201001</i>		
<i>TOI:</i>	<i>H071 Individual Health - Specified Disease - Limited Benefit</i>	<i>Sub-TOI:</i>	<i>H071.002A Dread Disease - Cancer Only</i>
<i>Product Name:</i>	<i>Individual Cancer</i>		
<i>Project Name/Number:</i>	<i>Individual Cancer/0289201001</i>		

Disposition

Disposition Date: 10/25/2010

Implementation Date:

Status: Approved-Closed

Comment:

We have approved a 15% level rate increase on your submission. The approval is subject to the following conditions:

1. Rate increases will not be given prior to the first annual anniversary date of any policy.
2. After the first annual anniversary date of any policy, increases will not be given more frequently than once in a twelve (12) month period.
3. All increases in rates, other than a change in age or an individual moving to another geographical area, must be submitted to our Department for approval.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Protective Life Insurance Company	25.000%	25.000%	\$34,070	21	\$136,280	25.000%	25.000%

SERFF Tracking Number: LWLL-126773344 State: Arkansas

Filing Company: Protective Life Insurance Company State Tracking Number: 46674

Company Tracking Number: 0289201001

TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only

Product Name: Individual Cancer

Project Name/Number: Individual Cancer/0289201001

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Supporting Document	Authorization Letter	Approved-Closed	Yes
Supporting Document	Cover Letter	Approved-Closed	Yes
Supporting Document	Outline of Coverage	Approved-Closed	Yes
Supporting Document	Universal Transmittal	Approved-Closed	Yes
Supporting Document	Response to 09/09/2010 objection letter	Approved-Closed	Yes
Rate (revised)	CA05 Rate Sheets	Approved-Closed	Yes
Rate	CA05 Rate Sheets	Replaced	Yes
Rate (revised)	CA06 Rate Sheets	Approved-Closed	Yes
Rate	CA06 Rate Sheets	Filed-Closed	Yes
Rate (revised)	CA08 Rate Sheets	Approved-Closed	Yes
Rate	CA08 Rate Sheets	Replaced	Yes

SERFF Tracking Number: *LWLL-126773344* *State:* *Arkansas*
Filing Company: *Protective Life Insurance Company* *State Tracking Number:* *46674*
Company Tracking Number: *0289201001*
TOI: *H071 Individual Health - Specified Disease - Limited Benefit* *Sub-TOI:* *H071.002A Dread Disease - Cancer Only*
Product Name: *Individual Cancer*
Project Name/Number: *Individual Cancer/0289201001*

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 10/01/2010
Submitted Date 10/01/2010
Respond By Date
Dear Brian Stentz,

 This will acknowledge receipt of the captioned filing.

Objection 1

 - Health - Actuarial Justification (Supporting Document)

Comment: Mr. Dan Honey, Insurance Deputy Commission, has reviewed the letter from Ms. Bonnie S. Albritton with respect to the 25% increase.

Again, we request that you accept the 15% increase in lieu of disapproval.

We appreciate your understanding and cooperation.

Please feel free to contact me if you have questions.

Sincerely,
Rosalind Minor

SERFF Tracking Number: LWLL-126773344 State: Arkansas
Filing Company: Protective Life Insurance Company State Tracking Number: 46674
Company Tracking Number: 0289201001
TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only
Product Name: Individual Cancer
Project Name/Number: Individual Cancer/0289201001

Response Letter

Response Letter Status Submitted to State
Response Letter Date 10/14/2010
Submitted Date 10/14/2010

Dear Rosalind Minor,

Comments:

Response 1

Comments: Protective will accept the 15% increase. Attached are the revised rate sheets with the 15% increase.

Related Objection 1

Applies To:

- Health - Actuarial Justification (Supporting Document)

Comment:

Mr. Dan Honey, Insurance Deputy Commission, has reviewed the letter from Ms. Bonnie S. Albritton with respect to the 25% increase.

Again, we request that you accept the 15% increase in lieu of disapproval.

We appreciate your understanding and cooperation.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

Document Name: Affected Form Numbers:	Rate Action:	Rate Action Information:	Attach Document:
CA05 Rate Sheets CA05	Revised	Previous State Filing Number Percent Rate Change Request 15	

Previous Version

SERFF Tracking Number: LWLL-126773344 State: Arkansas
Filing Company: Protective Life Insurance Company State Tracking Number: 46674
Company Tracking Number: 0289201001
TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only
Product Name: Individual Cancer
Project Name/Number: Individual Cancer/0289201001

CA05 Rate Sheets CA05 Revised Previous State Filing Number
Percent Rate Change Request
25

CA06 Rate Sheets CA06 Revised Previous State Filing Number
Percent Rate Change Request
15

Previous Version

CA06 Rate Sheets CA06 Revised Previous State Filing Number
Percent Rate Change Request
25

CA08 Rate Sheets CA08 Revised Previous State Filing Number
Percent Rate Change Request
15

Previous Version

CA08 Rate Sheets CA08 Revised Previous State Filing Number
Percent Rate Change Request
25

Sincerely,
Brian Stentz

SERFF Tracking Number: LWLL-126773344 State: Arkansas
Filing Company: Protective Life Insurance Company State Tracking Number: 46674
Company Tracking Number: 0289201001
TOI: H07I Individual Health - Specified Disease - Sub-TOI: H07I.002A Dread Disease - Cancer Only
Limited Benefit
Product Name: Individual Cancer
Project Name/Number: Individual Cancer/0289201001

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 09/08/2010
Submitted Date 09/08/2010
Respond By Date
Dear Brian Stentz,

This will acknowledge receipt of the captioned filing.

Objection 1
- Health - Actuarial Justification (Supporting Document)

Comment:

As you are probably aware, our Department has been working with insurance companies on the rate increases which they are submitting to our Department.

The companies have been filing rate increases on specified disease policies in excess of 15%. Our Department is requesting that the companies consider no more than a 15% increase due to substantial increases in past years and/or the impact that another increase would have on the insureds during this difficult economic time.

Some of the companies have products, like yours, that have unlimited radiation and chemotherapy benefits. These companies have graciously accepted the 15% rate increase.

If you accept the 15%, please provide a revised actuarial memorandum along with the revised rates.

Thank you for your understanding and cooperation.

Please feel free to contact me if you have questions.

Sincerely,
Rosalind Minor

SERFF Tracking Number: LWLL-126773344 State: Arkansas
Filing Company: Protective Life Insurance Company State Tracking Number: 46674
Company Tracking Number: 0289201001
TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only
Product Name: Individual Cancer
Project Name/Number: Individual Cancer/0289201001

Response Letter

Response Letter Status Submitted to State
Response Letter Date 09/17/2010
Submitted Date 09/17/2010

Dear Rosalind Minor,

Comments:

Response 1

Comments: Attached is our response to your 09/09/2010 objection letter.

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Related Objection 1

Applies To:

- Health - Actuarial Justification (Supporting Document)

Comment:

As you are probably aware, our Department has been working with insurance companies on the rate increases which they are submitting to our Department.

The companies have been filing rate increases on specified disease policies in excess of 15%. Our Department is requesting that the companies consider no more than a 15% increase due to substantial increases in past years and/or the impact that another increase would have on the insureds during this difficult economic time.

Some of the companies have products, like yours, that have unlimited radiation and chemotherapy benefits. These companies have graciously accepted the 15% rate increase.

If you accept the 15%, please provide a revised actuarial memorandum along with the revised rates.

Thank you for your understanding and cooperation.

Changed Items:

Supporting Document Schedule Item Changes

State: *Arkansas*

State Tracking Number: 46674

Company Tracking Number: 0289201001

TOI: H071 Individual Health - Specified Disease - Limited Benefit

Sub-TOI: H07I.002A Dread Disease - Cancer Only

Product Name: *Individual Cancer*

Project Name/Number: *Individual Cancer/0289201001*

Satisfied -Name: Response to 09/09/2010 objection letter

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,
Brian Stentz

SERFF Tracking Number:	LWLL-126773344	State:	Arkansas
Filing Company:	Protective Life Insurance Company	State Tracking Number:	46674
Company Tracking Number:	0289201001		
TOI:	H071 Individual Health - Specified Disease - Limited Benefit	Sub-TOI:	H071.002A Dread Disease - Cancer Only
Product Name:	Individual Cancer		
Project Name/Number:	Individual Cancer/0289201001		

Rate Information

Rate data applies to filing.

Filing Method:	serff
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	25.000%
Effective Date of Last Rate Revision:	03/01/2010
Filing Method of Last Filing:	serff

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Protective Life Insurance Company	25.000%	25.000%	\$34,070	21	\$136,280	25.000%	25.000%

SERFF Tracking Number: LWLL-126773344 State: Arkansas

Filing Company: Protective Life Insurance Company State Tracking Number: 46674

Company Tracking Number: 0289201001

TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only

Product Name: Individual Cancer

Project Name/Number: Individual Cancer/0289201001

Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved-Closed 10/25/2010	CA05 Rate Sheets	CA05	Revised	Previous State Filing Number: Percent Rate Change Request: 15.000	CA05 Revised Rate Sheets - AR.pdf
Approved-Closed 10/25/2010	CA06 Rate Sheets	CA06	Revised	Previous State Filing Number: Percent Rate Change Request: 15.000	CA06 Revised Rate Sheets - AR.pdf
Approved-Closed 10/25/2010	CA08 Rate Sheets	CA08	Revised	Previous State Filing Number: Percent Rate Change Request: 15.000	CA08 Revised Rate Sheets - AR.pdf

**Arkansas
Cancer Policy CA-05
Current Rates**

Payroll Deduction Monthly Rates

	Individual	Family
All ages	\$477.36	\$847.77

Direct Monthly Rates

Issue Age	Individual	Family
under 46	\$521.71	\$912.99
46-59	652.13	1,239.05
60-70	1,194.71	2,282.47

Association Monthly Rates

	Individual	Family
All ages	\$521.71	\$912.99

**Arkansas
Cancer Policy CA-05
Proposed Rates with a 15% increase
Effective 3/1/2011**

Payroll Deduction Monthly Rates

	Individual	Family
All ages	\$548.97	\$974.94

Direct Monthly Rates

Issue Age	Individual	Family
under 46	\$599.96	\$1,049.94
46-59	749.95	1,424.91
60-70	1,373.92	2,624.84

Association Monthly Rates

	Individual	Family
All ages	\$599.96	\$1,049.94

**Arkansas
Cancer Policy CA-06
Current Rates**

Monthly Rates

Issue Age	Individual	Family
55 & over	\$118.45	\$229.79

**Arkansas
Cancer Policy CA-06
Proposed Rates with a 15% increase
Effective 3/1/2011**

Monthly Rates

	Individual	Family
55 & over	\$136.21	\$264.25

**Arkansas
Cancer Policy CA-08
Current Rates**

Payroll Deduction Monthly Rates

		Daily Hospital Benefit			
		\$120	\$220	\$320	\$420
Individual	All ages	\$451.89	\$514.15	\$575.65	\$637.90
Family	All ages	764.28	876.79	989.29	1,101.80

Direct Monthly Rates

		Daily Hospital Benefit			
		\$120	\$220	\$320	\$420
	Issue Age				
Individual	under 46	\$451.89	\$514.15	\$575.65	\$637.90
	46-59	570.02	645.03	720.03	795.03
	60-70	1,038.42	1,179.05	1,319.68	1,460.31
Family	under 46	\$764.28	\$876.79	\$989.29	\$1,101.80
	46-59	1,038.42	1,179.05	1,319.68	1,460.31
	60-70	1,908.08	2,166.84	2,425.61	2,684.37

**Arkansas
Cancer Policy CA-08
Proposed Rates with a 15% increase
Effective 3/1/2011**

Payroll Deduction Monthly Rates

		Daily Hospital Benefit			
		\$120	\$220	\$320	\$420
Individual	All ages	\$519.68	\$591.27	\$662.00	\$733.59
Family	All ages	878.93	1,008.31	1,137.69	1,267.07

Direct Monthly Rates

		Daily Hospital Benefit			
		\$120	\$220	\$320	\$420
		Issue Age			
Individual	under 46	\$519.68	\$591.27	\$662.00	\$733.59
	46-59	655.53	741.78	828.04	914.29
	60-70	1,194.18	1,355.91	1,517.64	1,679.36
Family	under 46	\$878.93	\$1,008.31	\$1,137.69	\$1,267.07
	46-59	1,194.18	1,355.91	1,517.64	1,679.36
	60-70	2,194.30	2,491.87	2,789.45	3,087.02

<i>SERFF Tracking Number:</i>	<i>LWLL-126773344</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Protective Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46674</i>
<i>Company Tracking Number:</i>	<i>0289201001</i>		
<i>TOI:</i>	<i>H071 Individual Health - Specified Disease - Limited Benefit</i>	<i>Sub-TOI:</i>	<i>H071.002A Dread Disease - Cancer Only</i>
<i>Product Name:</i>	<i>Individual Cancer</i>		
<i>Project Name/Number:</i>	<i>Individual Cancer/0289201001</i>		

Supporting Document Schedules

	Item Status:	Status
		Date:
Satisfied - Item: Health - Actuarial Justification	Approved-Closed	10/25/2010
Comments:		
Attachment:		
AR memo.pdf		

	Item Status:	Status
		Date:
Satisfied - Item: Authorization Letter	Approved-Closed	10/25/2010
Comments:		
Attachment:		
2010 Authorization Letter.pdf		

	Item Status:	Status
		Date:
Satisfied - Item: Cover Letter	Approved-Closed	10/25/2010
Comments:		
Attachment:		
AR Cover Letter.pdf		

	Item Status:	Status
		Date:
Satisfied - Item: Outline of Coverage	Approved-Closed	10/25/2010
Comments:		
Attachment:		
AR Outline of Coverage.pdf		

	Item Status:	Status
		Date:
Satisfied - Item: Universal Transmittal	Approved-Closed	10/25/2010

SERFF Tracking Number: LWLL-126773344 State: Arkansas
Filing Company: Protective Life Insurance Company State Tracking Number: 46674
Company Tracking Number: 0289201001
TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only
Product Name: Individual Cancer
Project Name/Number: Individual Cancer/0289201001

Comments:

Attachment:

industry_rates_lh_trans-AR.pdf

	Item Status:	Status Date:
Satisfied - Item: Response to 09/09/2010 objection letter	Approved-Closed	10/25/2010

Comments:

Attachment:

AR Response 09-14-10.pdf

Individual Cancer Policy Forms CA03, CA04, CA05, CA06 and CA08 Actuarial Memorandum – Arkansas

Purpose & Scope

The purpose of this Actuarial Memorandum is to document the need for a rate increase on the above forms and demonstrate that the anticipated loss ratio of these products meets the minimum requirements of the states in which they were sold. The historical and projected future national experience of these five forms have been combined into one rating pool for the purpose of filing increased premium rates.

The experience of this block has consistently shown high loss ratios for the past several years. The poor experience is due largely to the policies with unlimited radiation and chemotherapy benefits. Because we expect the poor experience to continue, a rate increase is necessary.

Benefits and Renewability

These forms pay benefits only for cancer. Attached is an outline of the policy benefits for each of the forms. While many benefits have fixed dollar limits, the Radiation & Chemotherapy Benefit, the Blood & Plasma Benefit, and the Extended Hospital Benefits pay the actual charges without any maximums.

These forms are guaranteed renewable for life. The Company has the right to change premiums on a class basis.

Optional Endorsements

Since 2001, the Company has offered benefit reductions to policyholders in exchange for a lower premium. Endorsements CE-21 and CE-21A limit the Radiation and Chemotherapy benefits to \$10,000 per insured per calendar year. In 2006 Protective began offering two new endorsements. The CE-33 and CE-33A endorsements limit the R&C benefits to an annual maximum of \$100,000 per insured during the first service year and \$30,000 per insured during each subsequent service year. With forms CE-34 and CE-34A, the R&C benefits are limited to \$50,000 per insured per service year.

As in prior years, the Company will offer these endorsements in exchange for a lower premium. The premium rates for those accepting the offer in 2010 will be reduced to the rates that were originally approved for the endorsements.

Applicability

The requested rate increase will apply to the base coverage of policy forms CA03, CA04, CA05, CA06, and CA08 for policies that have not elected one of the optional endorsements.

This rate increase will apply only to in force business. The company started issuing these forms in 1987. New sales of CA03, CA04, and CA05 policies were discontinued in 1990. In 1995, new sales of CA08 were discontinued. Finally, new sales of CA06 policies were discontinued in 1997.

Rate Increase

The Company is requesting a 25% rate increase to be effective on or after March 1, 2011 for policyowners with the aforementioned forms that have not elected the optional endorsement. Enclosed are the current rates and the proposed rates, reflecting the requested rate increase.

History of Rate Adjustments

The Arkansas rate history is shown in Exhibit III.

Number of Policyholders

As of June 30, 2010, the number of policyholders are as follows:

Arkansas	21
Nationwide w/o Florida	991

Minimum Required Loss Ratio

The NAIC minimum required loss ratios at the time of original approval are as follows:

CA03	50%
CA04	50%
CA05	50%
CA06	55%
CA08	55%

Past Experience and Credibility

Exhibit I contains the historical experience from inception through June 30, 2010 for policies that have not accepted one of the optional endorsements, as supplied by the Company. The historical experience includes all states combined except Florida, which requires a separate rating pool.

Policyholders have been offered optional endorsements in exchange for a lower premium since 2001. Protective agreed to the Tennessee Insurance Department's request to form two rating pools, one with the endorsements, and the other without the endorsements. This filing only includes the pool without the endorsements.

The cumulative loss ratio through June 30, 2010 is 79.3%.
The cumulative actual-to-expected claim ratio is 158.8%.

Projected Loss Ratio Experience

Exhibit I contains a projection of the anticipated future loss ratio experience on these forms with the requested rate increase.

Exhibit II contains a projection of the anticipated future loss ratio experience on these forms assuming no rate increase.

Protective Life Insurance Company

These projections are based on the following assumptions.

1. Rate Increase: 33.8% nationwide weighted-average effective May 7, 2011. Includes weighted average increase of 25.0% in Arkansas effective March 1, 2011.
2. Medical Trend: 20% per annum through the end of the proposed rating period. None thereafter.
3. Lapse Rate: 15.0% all years plus an additional 6.9% in 2011 because of the rate increases in those years.
4. Interest Factor: 4.5% per year.
5. Aging Factor: See projection; based on originally filed expected loss ratios.

The anticipated loss ratios are as follows:

	<u>With Increase</u>	<u>Without Increase</u>
Future Loss Ratio	98.0%	124.3%
Lifetime Loss Ratio	75.4%	76.1%

Rates

Enclosed with this memorandum are the current and proposed premium rates for each form.

Actuarial Certification

To the best of my knowledge and judgment, this rate submission is in compliance with the applicable laws and regulations of the states in which it is filed and the benefits are reasonable in relation to the premiums charged.



Bonnie S. Albritton, F.S.A., M.A.A.A.

LEWIS & ELLIS, INC.
Actuaries & Consultants
August 17, 2010

Exhibit I
CA03, CA04, CA05, CA06 & CA08 - National Pool without Optional Endorsements
10-Year Projection with Requested Rate Increase

This projection covers the national pool of policies.
Based on historical data through 06/30/2010

National pool Includes all states except Florida																													
	Calendar Year	WITHOUT INTEREST								WITH INTEREST			ASSUMPTIONS Premium Factors						Claims Factors				Persistency Factors					Interest Factors	
		Earned Premium	Paid Claims	Claim Reserve	Incurred Claims	Loss Ratio	Expected Claims	Expected Loss Ratio	A/E Claim Ratio	Earned Premium	Incurred Claims	Loss Ratio	Rate Increase	Effective Date	Effective-ness	Rate Effect	Aging	Combined	Medical Trend	Insurance Trend	Aging	Combined	Lapses	Shock Lapses	Adverse Selection	Policy Persistency	Claims Persistency	at: 4.50% Factor 1.0450	
Past Experience	1987	67,599	12,163	0	12,163	17.99%	22,767	33.68%	53.43%	188,102	33,846	17.99%															23.250	2.7826	
	1988	1,163,192	295,006	0	295,006	25.36%	355,191	30.54%	83.06%	3,097,340	785,541	25.36%														22.250	2.6628		
	1989	3,396,439	993,992	0	993,992	29.27%	1,054,831	31.06%	94.23%	8,654,560	2,532,817	29.27%														21.250	2.5481		
	1990	7,434,660	2,752,771	0	2,752,771	37.03%	2,322,961	31.25%	118.50%	18,128,672	6,712,356	37.03%														20.250	2.4384		
	1991	11,463,241	5,433,017	0	5,433,017	47.40%	3,798,002	33.13%	143.05%	26,748,289	12,677,385	47.40%														19.250	2.3334		
	1992	16,159,068	8,700,034	0	8,700,034	53.84%	5,754,666	35.61%	151.18%	36,081,834	19,426,441	53.84%	12.92%	5/21/92												18.250	2.2329		
	1993	21,109,132	10,956,600	0	10,956,600	51.90%	7,816,223	37.03%	140.18%	45,105,176	23,411,639	51.90%	0.00%													17.250	2.1368		
	1994	23,969,376	13,861,600	0	13,861,600	57.83%	9,394,706	39.19%	147.55%	49,011,325	28,343,475	57.83%	19.74%	8/16/94												16.250	2.0447		
	1995	25,512,767	14,512,682	0	14,512,682	56.88%	10,413,869	40.82%	139.36%	49,920,737	28,396,912	56.88%	0.00%													15.250	1.9567		
	1996	24,729,153	17,227,710	0	17,227,710	69.67%	10,463,111	42.31%	164.65%	46,303,773	32,257,797	69.67%	26.02%	8/02/96												14.250	1.8724		
	1997	24,277,168	17,625,149	0	17,625,149	72.60%	10,956,351	45.13%	160.87%	43,499,961	31,580,838	72.60%	0.00%													13.250	1.7918		
	1998	21,333,387	18,256,585	0	18,256,585	85.58%	10,322,022	48.38%	176.87%	36,579,214	31,303,586	85.58%	25.72%	2/24/98												12.250	1.7146		
	1999	21,276,056	18,174,821	0	18,174,821	85.42%	10,870,853	51.09%	167.19%	34,909,963	29,821,426	85.42%	23.94%	3/24/99												11.250	1.6408		
	2000	21,002,060	19,459,746	0	19,459,746	92.66%	11,256,637	53.60%	172.87%	32,976,448	30,554,779	92.66%	28.91%	5/24/00												10.250	1.5702		
	2001	20,143,574	18,154,491	0	18,154,491	90.13%	11,302,169	56.11%	160.63%	30,266,501	27,277,827	90.13%	39.74%	6/18/01												9.250	1.5025		
	2002	18,464,247	18,651,862	0	18,651,862	101.02%	10,849,310	58.76%	171.92%	26,548,562	26,818,321	101.02%	25.81%	8/13/02												8.250	1.4378		
	2003	17,014,166	16,761,937	0	16,761,937	98.52%	10,409,759	61.18%	161.02%	23,410,127	23,063,080	98.52%	36.39%	8/12/03												7.250	1.3759		
	2004	15,257,494	15,193,068	0	15,193,068	99.58%	9,690,374	63.51%	156.79%	20,089,079	20,004,251	99.58%	22.86%	7/02/04												6.250	1.3167		
	2005	13,028,662	13,984,299	0	13,984,299	107.33%	8,592,097	65.95%	162.76%	16,415,735	17,619,810	107.33%	25.26%	3/21/05												5.250	1.2600		
	2006	9,463,768	10,926,008	0	10,926,008	115.45%	6,446,976	68.12%	169.47%	11,410,596	13,173,639	115.45%	16.84%	4/07/06												4.250	1.2057		
	2007	9,123,246	9,782,623	0	9,782,623	107.23%	6,421,135	70.38%	152.35%	10,526,338	11,287,123	107.23%	26.69%	4/03/07												3.250	1.1538		
	2008	7,770,352	8,760,833	42,289	8,803,122	113.29%	5,632,435	72.49%	156.29%	8,579,310	9,719,599	113.29%	30.66%	4/20/08												2.250	1.1041		
	2009	5,948,084	6,746,580	347,215	7,093,795	119.26%	4,438,924	74.63%	159.81%	6,284,525	7,495,040	119.26%	41.53%	4/29/09	0.6755											1.250	1.0566		
	Jan-Jun 2010	2,419,381	2,160,707	895,764	3,056,471	126.33%	1,861,239	76.93%	164.22%	2,446,152	3,090,291	126.33%	33.26%	4/21/10	0.6976	1.3617	1.0000	1.3617								0.250	1.0111		
	Current Loss Ratio		5,072,245				85.67%																						
Future Experience (Projected 10-Years)	Jul-Dec 2010	2,352,557			2,174,593	92.44%	1,809,831	76.93%	120.15%	2,326,811	2,150,794	92.44%			1.0000	1.0816	1.0000	1.0816	1.0466	1.0000	1.0309	1.0789	0.0724	0.0000	1.0000	0.9276	0.9276	-0.250	0.9891
	2011	4,485,485			4,225,910	94.21%	3,556,819	79.30%	118.81%	4,245,355	3,999,677	94.21%	33.8%	5/07/11	0.6530	1.2210	1.0000	1.2210	1.2000	1.0000	1.0308	1.2369	0.1500	0.0692	0.9308	0.7808	0.7856	-1.250	0.9465
	2012	4,179,443			3,926,100	93.94%	3,408,781	81.56%	115.18%	3,785,356	3,555,902	93.94%			1.0000	1.0962	1.0000	1.0962	1.0627	1.0000	1.0286	1.0930	0.1500	0.0000	1.0000	0.8500	0.8500	-2.250	0.9057
	2013	3,552,526			3,426,232	96.44%	2,974,778	83.74%	115.18%	3,078,998	2,969,538	96.44%			1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0267	1.0267	0.1500	0.0000	1.0000	0.8500	0.8500	-3.250	0.8667
	2014	3,019,647			2,985,429	98.87%	2,592,056	85.84%	115.18%	2,504,448	2,476,067	98.87%			1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0251	1.0251	0.1500	0.0000	1.0000	0.8500	0.8500	-4.250	0.8294
	2015	2,566,700			2,595,161	101.11%	2,253,212	87.79%	115.18%	2,037,111	2,059,699	101.11%			1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0227	1.0227	0.1500	0.0000	1.0000	0.8500	0.8500	-5.250	0.7937
	2016	2,181,895			2,253,936	103.31%	1,956,948	89.70%	115.18%	1,656,980	1,711,846	103.31%			1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0218	1.0218	0.1500	0.0000	1.0000	0.8500	0.8500	-6.250	0.7595
	2017	1,854,441			1,957,196	105.54%	1,699,308	91.63%	115.18%	1,347,783	1,422,464	105.54%			1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0216	1.0216	0.1500	0.0000	1.0000	0.8500	0.8500	-7.250	0.7268
	2018	1,576,275			1,696,951	107.66%	1,473,354	93.47%	115.18%	1,096,283	1,180,212	107.66%			1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0200	1.0200	0.1500	0.0000	1.0000	0.8500	0.8500	-8.250	0.6955
	2019	1,339,834			1,468,129	109.58%	1,274,682	95.14%	115.18%	891,713	977,099	109.58%			1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0178	1.0178	0.1500	0.0000	1.0000	0.8500	0.8500	-9.250	0.6655
Past Future Lifetime		341,526,272	269,384,284	1,285,268	270,669,552	79.25%	170,446,607	49.91%	158.80%	587,182,321	437,387,819	74.49%																	
		27,108,604			26,709,637	98.53%	22,999,769	84.84%	116.13%	22,970,837	22,503,298	97.96%																	
		368,634,875			297,379,190	80.67%	193,446,376	52.48%	153.73%	610,153,158	459,891,116	75.37%																	

* The projected rate increase is the weighted-average requested nationwide rate increase, excluding Florida, which includes the requested 25% rate increase in Arkansas.

Current Loss Ratio	Historical Earned Premium	Earned Prem on Current Rate Level	Historical Incurred Claims	Claim Trend Factor	Current Incurred Claims	Current Loss Ratio
	9,463,768	30,720,558	10,926,008	2.359	25,776,334	83.91%
2006	9,123,246	23,758,633	9,782,623	1.904	18,621,944	78.38%
2007	7,770,352	15,774,453	8,803,122	1.536	13,521,240	85.72%
2008	5,948,084	8,760,540	7,093,795	1.239	8,791,612	100.35%
2009	2,419,381	2,616,918	3,056,471	1.055	3,224,912	123.23%
Total	34,724,831	81,631,102	39,662,019		69,936,042	85.67%

Exhibit II
CA03, CA04, CA05, CA06 & CA08 - National Pool without Optional Endorsements
10-Year Projection with Requested Rate Increase

This projection covers the national pool of policies.
Based on historical data through 06/30/2010

National pool includes all states except Florida																															
Calendar Year	WITHOUT INTEREST								WITH INTEREST			ASSUMPTIONS						Claims Factors				Persistency Factors					Interest Factors				
	Earned Premium	Paid Claims	Claim Reserve	Incurred Claims	Loss Ratio	Expected Claims	Expected Loss Ratio	A/E Claim Ratio	Earned Premium	Incurred Claims	Loss Ratio	Premium Factors						Medical Trend	Insurance Trend	Aging	Combined	Lapses	Shock Lapses	Adverse Selection	Policy Persistency	Claims Persistency	at:				
												Rate Increase	Effective Date	Effective-ness	Rate Effect	Aging	Combined										Years	Factor 4.50% 1,0450			
Past Experience	1987	67,599	12,163	0	12,163	17.99%	22,767	33.68%	53.43%	188,102	33,846	17.99%																		23.250	2.7826
	1988	1,163,192	295,006	0	295,006	25.36%	355,191	30.54%	83.06%	3,097,340	785,541	25.36%																		22.250	2.6628
	1989	3,396,439	993,992	0	993,992	29.27%	1,054,831	31.06%	94.23%	8,654,560	2,532,817	29.27%																		21.250	2.5481
	1990	7,434,660	2,752,771	0	2,752,771	37.03%	2,322,961	31.25%	118.50%	18,128,672	6,712,356	37.03%																		20.250	2.4384
	1991	11,463,241	5,433,017	0	5,433,017	47.40%	3,798,002	33.13%	143.05%	26,748,289	12,677,385	47.40%																		19.250	2.3334
	1992	16,159,068	8,700,034	0	8,700,034	53.84%	5,754,666	35.61%	151.18%	36,081,834	19,426,441	53.84%	12.92%	5/21/92																18.250	2.2329
	1993	21,109,132	10,956,600	0	10,956,600	51.90%	7,816,223	37.03%	140.18%	45,105,176	23,411,639	51.90%	0.00%																	17.250	2.1368
	1994	23,969,376	13,861,600	0	13,861,600	57.83%	9,394,706	39.19%	147.55%	49,011,325	28,343,475	57.83%	19.74%	8/16/94																16.250	2.0447
	1995	25,512,767	14,512,682	0	14,512,682	56.88%	10,413,869	40.82%	139.36%	49,920,737	28,396,912	56.88%	0.00%																	15.250	1.9567
	1996	24,729,153	17,227,710	0	17,227,710	69.67%	10,463,111	42.31%	164.65%	46,303,773	32,257,797	69.67%	26.02%	8/02/96																14.250	1.8724
	1997	24,277,168	17,625,149	0	17,625,149	72.60%	10,956,351	45.13%	160.87%	43,499,961	31,580,838	72.60%	0.00%																	13.250	1.7918
	1998	21,333,387	18,256,585	0	18,256,585	85.58%	10,322,022	48.38%	176.87%	36,579,214	31,303,586	85.58%	25.72%	2/24/98																12.250	1.7146
	1999	21,276,056	18,174,821	0	18,174,821	85.42%	10,870,853	51.09%	167.19%	34,909,963	29,821,426	85.42%	23.94%	3/24/99																11.250	1.6408
	2000	21,002,060	19,459,746	0	19,459,746	92.66%	11,256,637	53.60%	172.87%	32,976,448	30,554,779	92.66%	28.91%	5/24/00																10.250	1.5702
	2001	20,143,574	18,154,491	0	18,154,491	90.13%	11,302,169	56.11%	160.63%	30,266,501	27,277,827	90.13%	39.74%	6/18/01																9.250	1.5025
	2002	18,464,247	18,651,862	0	18,651,862	101.02%	10,849,310	58.76%	171.32%	26,548,562	26,818,321	101.02%	25.81%	8/13/02																8.250	1.4378
	2003	17,014,166	16,761,937	0	16,761,937	98.52%	10,409,759	61.18%	161.02%	23,410,127	23,063,080	98.52%	36.39%	8/12/03																7.250	1.3759
	2004	15,257,494	15,193,068	0	15,193,068	99.58%	9,690,374	63.51%	156.79%	20,089,079	20,004,251	99.58%	22.86%	7/02/04																6.250	1.3167
	2005	13,028,662	13,984,299	0	13,984,299	107.33%	8,592,097	65.95%	162.76%	16,415,735	17,619,810	107.33%	25.26%	3/21/05																5.250	1.2600
	2006	9,463,768	10,926,008	0	10,926,008	115.45%	6,446,976	68.12%	169.47%	11,410,596	13,173,639	115.45%	16.84%	4/07/06																4.250	1.2057
	2007	9,123,246	9,782,623	0	9,782,623	107.23%	6,421,135	70.38%	152.35%	10,526,338	11,287,123	107.23%	26.69%	4/03/07																3.250	1.1538
	2008	7,770,352	8,760,833	42.289	8,803,122	113.29%	5,632,435	72.49%	156.29%	8,579,310	9,719,599	113.29%	30.66%	4/20/08																2.250	1.1041
	2009	5,948,084	6,746,580	347.215	7,093,795	119.26%	4,438,924	74.63%	159.81%	6,284,525	7,495,040	119.26%	41.53%	4/29/09																1.250	1.0566
Jan-Jun	2010	2,419,381	2,160,707	895.764	3,056,471	126.33%	1,861,239	76.93%	164.22%	2,446,152	3,090,291	126.33%	33.26%	4/21/10																0.250	1.0111
Current Loss Ratio		5,072,245				85.67%																									
Jul-Dec	2010	2,352,557			2,174,593	92.44%	1,809,831	76.93%	120.15%	2,326,811	2,150,794	92.44%				1.0000	1.0816	1.0000	1.0816	1.0466	1.0000	1.0309	1.0789	0.0724	0.0000	1.0000	0.9276	0.9276	-0.250	0.9891	
	2011	3,999,346			4,572,594	114.33%	3,171,329	79.30%	144.19%	3,785,242	4,327,801	114.33%	0.0%	5/07/11		0.6530	1.0000	1.0000	1.0000	1.2000	1.0000	1.0308	1.2369	0.1500	0.0000	1.0000	0.8500	0.8500	-1.250	0.9465	
	2012	3,399,444			4,248,188	124.97%	2,772,609	81.56%	153.22%	3,078,905	3,847,619	124.97%	1.0000			1.0000	1.0000	1.0000	1.0627	1.0000	1.0286	1.0930	0.1500	0.0000	1.0000	0.8500	0.8500	-2.250	0.9057		
Future	2013	2,889,528			3,707,313	128.30%	2,419,603	83.74%	153.22%	2,504,373	3,213,152	128.30%	1.0000			1.0000	1.0000	1.0000	1.0000	1.0000	1.0267	1.0267	0.1500	0.0000	1.0000	0.8500	0.8500	-3.250	0.8667		
Experience	2014	2,456,099			3,230,346	131.52%	2,108,308	85.84%	153.22%	2,037,049	2,679,198	131.52%	1.0000			1.0000	1.0000	1.0000	1.0000	1.0000	1.0251	1.0251	0.1500	0.0000	1.0000	0.8500	0.8500	-4.250	0.8294		
(Projected	2015	2,087,684			2,808,063	134.51%	1,832,701	87.79%	153.22%	1,656,930	2,228,672	134.51%	1.0000			1.0000	1.0000	1.0000	1.0000	1.0000	1.0227	1.0227	0.1500	0.0000	1.0000	0.8500	0.8500	-5.250	0.7937		
10-Years)	2016	1,774,531			2,438,844	137.44%	1,591,728	89.70%	153.22%	1,347,742	1,852,282	137.44%	1.0000			1.0000	1.0000	1.0000	1.0000	1.0000	1.0218	1.0218	0.1500	0.0000	1.0000	0.8500	0.8500	-6.250	0.7595		
	2017	1,508,352			2,117,760	140.40%	1,382,171	91.63%	153.22%	1,096,250	1,539,159	140.40%	1.0000			1.0000	1.0000	1.0000	1.0000	1.0000	1.0216	1.0216	0.1500	0.0000	1.0000	0.8500	0.8500	-7.250	0.7268		
	2018	1,282,099			1,836,165	143.22%	1,198,386	93.47%	153.22%	891,686	1,277,033	143.22%	1.0000			1.0000	1.0000	1.0000	1.0000	1.0000	1.0200	1.0200	0.1500	0.0000	1.0000	0.8500	0.8500	-8.250	0.6955		
	2019	1,089,784			1,588,571	145.77%	1,036,792	95.14%	153.22%	725,295	1,057,258	145.77%	1.0000			1.0000	1.0000	1.0000	1.0000	1.0000	1.0178	1.0178	0.1500	0.0000	1.0000	0.8500	0.8500	-9.250	0.6655		
Past		341,526,272	269,384,284	1,285,268	270,669,552	79.25%	170,446,607	49.91%	158.80%	587,182,321	437,387,819	74.49%																			
Future		22,839,423			28,722,436	125.76%	19,323,457	84.61%	148.64%	19,450,283	24,172,970	124.28%																			
Lifetime		364,365,695			299,391,988	82.17%	189,770,064	52.08%	157.77%	606,632,604	461,560,789	76.09%																			

Protective Life Insurance Company

**Exhibit III
Rate Increase History
CA03, CA04, CA05, CA06 & CA08
Arkansas**

Year	CA03		CA04		CA05		CA06		CA08	
	Amount	Implemented	Amount	Implemented	Amount	Implemented	Amount	Implemented	Amount	Implemented
1992	18.00%	May-92	25.00%	May-92	18.00%	Jun-92	0.00%		0.00%	
1994	0.00%		0.00%		0.00%		0.00%		33.00%	Aug-94
1995	0.00%		0.00%		0.00%		0.00%		0.00%	
1996	40.00%	Sep-96	40.00%	Sep-96	40.00%	Sep-96	0.00%		25.00%	Sep-96
1997	0.00%		0.00%		0.00%		0.00%		0.00%	
1998	25.00%	Mar-98	25.00%	Mar-98	40.00%	Mar-98	0.00%		25.00%	Mar-98
1999	25.00%	Aug-99	25.00%	Aug-99	25.00%	Apr-99	15.00%	Sep-99	25.00%	Apr-99
2000	35.00%	Jun-00	35.00%	Jun-00	45.00%	Jun-00	35.00%	Sep-00	25.00%	Jun-00
2001	50.00%	Aug-01	50.00%	Aug-01	50.00%	Aug-01	0.00%		50.00%	Aug-01
2002	25.00%	Sep-02	25.00%	Sep-02	25.00%	Sep-02	0.00%		25.00%	Sep-02
2003	50.00%	Sep-03	50.00%	Sep-03	50.00%	Sep-03	0.00%		50.00%	Sep-03
2004	N/A	N/A	0.00%		0.00%		0.00%		0.00%	
2005	N/A	N/A	45.00%	Jan-05	45.00%	Jan-05	0.00%		45.00%	Jan-05
2006	N/A	N/A	25.00%	Mar-06	25.00%	Mar-06	25.00%	Mar-06	25.00%	Mar-06
2007	N/A	N/A	N/A	N/A	25.00%	Mar-07	25.00%	Mar-07	25.00%	Mar-07
2008	N/A	N/A	N/A	N/A	25.00%	Mar-08	25.00%	Mar-08	25.00%	Mar-08
2009	N/A	N/A	N/A	N/A	25.00%	Mar-09	25.00%	Mar-09	16.00%	Mar-09
2010	N/A	N/A	N/A	N/A	25.00%	Mar-10	25.00%	Mar-10	25.00%	Mar-10

Benefit Plans Group
2801 Highway 280 South
Birmingham, AL 35223
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Fax: 205-268-6368



January 19, 2010

To Whom It May Concern:

I hereby authorize the actuarial consulting firm of Lewis & Ellis, Inc. to file rate revisions for cancer policies and riders on behalf of Protective Life Insurance Company.

This authorization includes the power to certify to the exempt status of certain forms, except where prohibited by law.

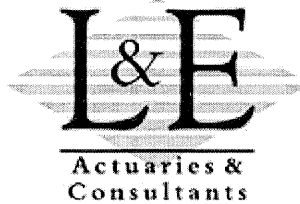
This authorization is to be effective January 1, 2010 to December 31, 2010.

A handwritten signature in cursive script, appearing to read "Paul R. Wells".

Paul R. Wells
Vice President and Life and Annuity Division CFO

Dallas

Glenn A. Tobleman, F.S.A., F.C.A.S.
S. Scott Gibson, F.S.A.
Cabe W. Chadick, F.S.A.
Michael A. Mayberry, F.S.A.
Steven D. Bryson, F.S.A.
Gregory S. Wilson, F.C.A.S.
David M. Dillon, F.S.A.
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Robert B. Thomas, Jr., F.S.A., C.F.A. (Of Counsel)



Kansas City

Gary L. Rose, F.S.A.
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Gary R. McElwain, FLMI
Christopher H. Davis, F.S.A.
Thomas L. Handley, F.S.A.
Anthony G. Proulx, F.S.A.
Karen E. Elsom, F.S.A.
Jill J. Humes, F.S.A.

London / Kansas City

Roger K. Annin, F.S.A.
Timothy A. DeMars, F.S.A.
Scott E. Morrow, F.S.A.

August 17, 2010

Mrs. Rosalind Minor
Arkansas Insurance Department
1200 W 3rd Street
Little Rock, Arkansas

Re: PROTECTIVE LIFE INSURANCE COMPANY
NAIC #68136; FEIN #63-0169720
Rate Increase - Cancer Policy Form CA03, CA04, CA05, CA06 and CA08

Dear Mrs. Minor:

The enclosed actuarial memorandum is being submitted on behalf of Protective Life Insurance Company for your review for approval of a 25% rate increase on the above cancer policy forms. Forms CA03, CA04, CA05, CA06 and CA08 have been combined for rating purposes. They all provide benefits for medical expenses incurred as a result of cancer-related expenses. All of the forms provide for unlimited Radiation & Chemotherapy benefits.

If you have further questions regarding this matter, you may contact me by e-mail at balbritton@lewisellis.com or by telephone (972) 850-0850 collect.

Sincerely,

A handwritten signature in cursive script that reads 'Bonnie Albritton'.

Bonnie S. Albritton, F.S.A., M.A.A.A.
Consulting Actuary

CANCER COVERAGE OUTLINE OF COVERAGE

POLICY FORM CA-03

(1) **Read Your Policy Carefully** - This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is therefore, important that you **READ YOUR POLICY CAREFULLY**.

(2) **Cancer Coverage** - Policies of this category are designed to provide, to persons insured, restricted coverage paying benefits **ONLY** when certain losses occur as a result of Cancer. Coverage is not provided for basic hospital, basic medical-surgical, or major medical expenses.

(3) **Benefits** - This policy pays benefits for actual expenses an insured incurs due to hospital confinement and certain other expenses resulting from treatment for Cancer of an insured, subject to the maximums listed below.

Benefit	Benefit Period/Maximum	Amount
In-Hospital Room and Board... (Semi-private room rate)	No lifetime maximum	Up to \$250 per day
In-Hospital Drugs & Medicine Diagnostic X-Rays & Lab...	No lifetime maximum	Up to 15% of In-Hospital Room & Board
Positive Diagnosis... diagnostic tests leading to positive Cancer diagnosis within 90 days	Only once for the same Cancer	Up to \$250
In-Hospital Special Nursing...	No lifetime maximum	Up to \$100 per day
In-Hospital Attending Physician...	No lifetime maximum	Up to \$30 per day
Blood & Plasma... not replaced by donors	No lifetime maximum	100%
Ambulance...	No lifetime maximum	100%
Radiation Therapy & Chemotherapy... (excluding lab tests and diagnostic X-rays)	No lifetime maximum	100%
New or Experimental Treatment...	Same as any other treatment	
Transportation... to nearest hospital providing prescribed specialized treatment	Maximum lifetime benefit \$2,000	100%

Family Member Lodging... while insured is hospitalized	60 days per hospitalization	Up to \$50 per day
Skilled Nursing Facility...	Up to number of days of covered hospital confinement	Up to \$50 per day
Breast Prosthesis...	Maximum \$600 lifetime	Up to \$300
Artificial Limb Prosthesis...	Maximum \$1,000 lifetime	Up to \$1,000
Surgical Expense...	Maximum \$3,000 for surgery Maximum \$900 for anesthesia per operation	See schedule in policy
First Occurrence... when internal Cancer first diagnosed	One time only per insured	\$1,000 lump sum
Waiver of Premium...	After 90 continuous days of disability due to cancer	
(The following benefits are in lieu of all other benefits under the policy.)		
Government Hospital Confinement...		First 30 days-\$175 per day Next 60 days-\$150 per day Thereafter-\$100 per day
Hospice... when treatment no longer prescribed and life expectancy less than 6 months	Maximum \$5,000 lifetime	Up to \$50 per day

(4) **Exclusions, Limitations, and Reductions** - Benefits are provided only for actual expenses incurred and are limited to the usual and customary charges for care, services or supplies. "Usual and customary" means the charges are not higher than the usual charge made by the provider and are similar to charges made by similar providers in the community.

All benefits under the policy will be reduced by 50% with respect to expenses incurred on or after an Insured's 65th birthday.

The policy covers only expenses resulting from treatment for Cancer. Such Cancer must be diagnosed 30 days or more after the date of issue of the policy.

No benefits will be paid for treatment received outside the United States or its territories.

(5) **Renewability** - This policy is guaranteed renewable for life as long as premiums are paid when due. We reserve the right to change premium rates. Any change in premium rates will apply to all policies of the same class in your state of residence.

CANCER COVERAGE OUTLINE OF COVERAGE

POLICY FORM CA-04

(1) **Read Your Policy Carefully** - This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is therefore, important that you **READ YOUR POLICY CAREFULLY**.

(2) **Cancer Coverage** - Policies of this category are designed to provide, to persons insured, restricted coverage paying benefits **ONLY** when certain losses occur as a result of Cancer. Coverage is not provided for basic hospital, basic medical-surgical, or major medical expenses.

(3) **Benefits** - This policy pays benefits for actual expenses an insured incurs due to hospital confinement and certain other expenses resulting from treatment for Cancer of an insured, subject to the maximums listed below.

Benefit	Benefit Period/Maximum	Amount
In-Hospital Room and Board... (Semi-private room rate)	No lifetime maximum	Up to \$125 per day
In-Hospital Drugs & Medicine Diagnostic X-Rays & Lab...	No lifetime maximum	Up to 15% of In-Hospital Room & Board
Positive Diagnosis... diagnostic tests leading to positive Cancer diagnosis within 90 days	Only once for the same Cancer	Up to \$125
In-Hospital Special Nursing...	No lifetime maximum	Up to \$50 per day
In-Hospital Attending Physician...	No lifetime maximum	Up to \$15 per day
Blood & Plasma... not replaced by donors	No lifetime maximum	100%
Ambulance...	No lifetime maximum	Up to \$50 per trip
Radiation Therapy & Chemotherapy... (excluding lab tests and diagnostic X-rays)	No lifetime maximum	100%
New or Experimental Treatment...	Same as any other treatment	

Transportation... to nearest hospital providing prescribed specialized treatment	Maximum lifetime benefit \$1,000	100%
Family Member Lodging... while insured is hospitalized	60 days per hospital- ization	Up to \$25 per day
Skilled Nursing Facility...	Up to number of days of covered hospital confinement	Up to \$25 per day
Breast Prosthesis...	Maximum \$300 lifetime	Up to \$150
Artificial Limb Prosthesis...	Maximum \$500 lifetime	Up to \$500
Surgical Expense...	Maximum \$1,500 for surgery Maximum \$450 for anesthesia per operation	See schedule in policy
First Occurrence... when internal Cancer first diagnosed	One time only per insured	\$500 lump sum
Waiver of Premium...	After 90 continuous days of disability due to cancer	
(The following benefits are in lieu of all other benefits under the policy.)		
Government Hospital Confinement...	First 30 days-\$88 per day Next 60 days-\$75 per day Thereafter-\$50 per day	
Hospice... when treatment no longer prescribed and life expectancy less than 6 months	Maximum \$2,500 lifetime	Up to \$25 per day

(4) **Exclusions, Limitations, and Reductions** - Benefits are provided only for actual expenses incurred and are limited to the usual and customary charges for care, services or supplies. "Usual and customary" means the charges are not higher than the usual charge made by the provider and are similar to charges made by similar providers in the community.

All benefits under the policy will be reduced by 50% with respect to expenses incurred on or after an insured's 65th birthday.

The policy covers only expenses resulting from treatment for Cancer. Such Cancer must be diagnosed 30 days or more after the date of issue of the policy. No benefits will be paid for treatment received outside the United States or its territories.

(5) **Renewability** - This policy is guaranteed renewable for life as long as premiums are paid when due. We reserve the right to change premium rates. Any change in premium rates will apply to all policies of the same class in your state of residence.

CA-04-OC

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CANCER COVERAGE OUTLINE OF COVERAGE

POLICY FORM CA-05

(1) **Read Your Policy Carefully** - This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is therefore, important that you **READ YOUR POLICY CAREFULLY**.

(2) **Cancer Coverage** - Policies of this category are designed to provide, to persons insured, restricted coverage paying benefits **ONLY** when certain losses occur as a result of Cancer. Coverage is not provided for basic hospital, basic medical-surgical, or major medical expenses.

(3) **Benefits** - This policy pays benefits for actual expenses an insured incurs due to hospital confinement and certain other expenses resulting from treatment for Cancer of an insured, subject to the maximums listed below.

Benefit	Benefit Period/Maximum	Amount
In-Hospital Room and Board.....	No lifetime maximum	\$160 per day (day 1-10) \$200 per day (day 11-75)
In-Hospital Special Nursing....	No lifetime maximum	Up to \$100 per day
In-Hospital Attending Physician.....	No lifetime maximum	Up to \$25 per day
Blood & Plasma..... not replaced by donors	No lifetime maximum	100%
Ambulance.....	No lifetime maximum	100%
Radiation Therapy & Chemotherapy..... (excluding lab tests and diagnostic X-rays)	No lifetime maximum	100%
New or Experimental Treatment..	Same as any other treatment	
Transportation..... to nearest hospital providing prescribed specialized treatment	No lifetime maximum	100% for commercial carrier \$.25 per mile for personal car

Home Recovery	Up to number of days of covered hospital confinement	\$100 per week (\$14.28 per day)
Prosthesis.....	Maximum of 2 devices	Up to \$500 each
Surgical Expense.....	Maximum \$2,500 for surgery Maximum \$630 for anesthesia per operation	See schedule in policy
Waiver of Premium.....	After 90 continuous days of disability due to cancer (The following benefits are in lieu of all other benefits under the policy.)	
Extended	No lifetime maximum	100% Hospital charges (day 76 and after)
Government Hospital Confinement.....	No lifetime maximum	\$200 per day
Hospice..... when treatment no longer prescribed and life expectancy less than 6 months	Maximum \$9,000 lifetime	Up to \$50 per day

(4) **Exclusions, Limitations, and Reductions** - Benefits are provided only for actual expenses incurred and are limited to the usual and customary charges for care, services or supplies. "Usual and customary" means the charges are not higher than the usual charge made by the provider and are similar to charges made by similar providers in the community.

The policy covers only expenses resulting from treatment for Cancer. Such Cancer must be diagnosed 30 days or more after the date of issue of the policy.

No benefits will be paid for treatment received outside the United States or its territories.

(5) **Renewability** - This policy is guaranteed renewable for life as long as premiums are paid when due. We reserve the right to change premium rates. Any change in premium rates will apply to all policies of the same class in your state of residence.

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DO0058149 00064

This policy **IS NOT A MEDICARE SUPPLEMENT POLICY.**

LIMITED BENEFIT CANCER POLICY

OUTLINE OF COVERAGE

POLICY FORM CA-06-AR

(1) **Read Your Policy Carefully** - This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is therefore, important that you **READ YOUR POLICY CAREFULLY.**

(2) **Cancer Coverage** - Policies of this category are designed to provide, to persons insured, restricted coverage paying benefits **ONLY** when certain losses occur as a result of Cancer. Coverage is not provided for basic hospital, basic medical-surgical, or major medical expenses.

(3) **Benefits** - This policy pays benefits for expenses an insured incurs due to hospital confinement and certain other expenses resulting from treatment for Cancer of an insured, subject to the maximums listed below.

Benefit	Benefit Period/Maximum	Amount
In-Hospital Room and Board.....	No lifetime maximum	\$125 per day (day 1-10) \$150 per day (day 11-75)
In-Hospital Special Nursing....	No lifetime maximum	Up to \$100 per day
In-Hospital Attending Physician.....	No lifetime maximum	Up to \$20 per day
Blood & Plasma..... not replaced by donors	No lifetime maximum	70%
Ambulance.....	No lifetime maximum	100%
Radiation Therapy & Chemotherapy..... (excluding lab tests and diagnostic X-rays)	No lifetime maximum	100% of first \$7,500; 75% thereafter
New or Experimental Treatment..	Same as any other treatment	
Transportation..... to nearest hospital providing prescribed specialized treatment	No lifetime maximum	100% for commercial carrier \$.25 per mile for personal car

LPMERGE -JOB05188-LCM#P83 -01/13/2009-23214423-GPCLB

Home Recovery	Up to number of days of prior Hospital confinement	\$100 per week (\$14.28 per day)
Prosthesis.....	Maximum of 3 devices	Up to \$300 each
Surgical Expense.....	Maximum \$1,500 for surgery Maximum \$405 for anesthesia per operation	See schedule in policy
Home Nursing Benefit.....	Up to 90 days	\$100 per day
Extended Care Facility.....	Up to twice the number of days of prior Hospital confinement	\$100 per day

(The following benefits are in lieu of all other benefits under the policy.)

Extended	No lifetime maximum	100% Hospital charges (day 76 and after)
Government Hospital Confinement.....	No lifetime maximum	\$100 per day
Hospice..... when treatment no longer prescribed and life expectancy less than 6 months	Maximum \$9,000 lifetime	Up to \$50 per day

(4) **Exclusions, Limitations, and Reductions** - Benefits are provided only for actual expenses incurred and are limited to the usual and customary charges for care, services or supplies. "Usual and customary" means the charges are not higher than the usual charge made by the provider and are similar to charges made by similar providers in the community.

The policy covers only expenses resulting from treatment for Cancer. Such Cancer must be diagnosed 30 days or more after the date of issue of the policy.

No benefits will be paid for treatment received outside the United States or its territories.

(5) **Renewability** - This policy is guaranteed renewable for life as long as premiums are paid when due. We reserve the right to change premium rates. Any change in premium rates will apply to all policies of the same class in your state of residence.

THIS POLICY IS NOT A MEDICARE SUPPLEMENT POLICY.

LIMITED BENEFIT CANCER COVERAGE

OUTLINE OF COVERAGE

POLICY FORM CA-08-AR

(1) **Read Your Policy Carefully** - This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is therefore, important that you **READ YOUR POLICY CAREFULLY**.

(2) **Cancer Coverage** - Policies of this category are designed to provide, to persons insured, restricted coverage paying benefits **ONLY** when certain losses occur as a result of Cancer. Coverage is not provided for basic hospital, basic medical-surgical, or major medical expenses.

(3) **Benefits** - This policy pays benefits for actual expenses an insured incurs due to hospital confinement and certain other expenses resulting from treatment for Cancer of an insured, subject to the maximums listed below.

Benefit	Benefit Period/Maximum	Amount
In-Hospital Benefit.....	No lifetime maximum	See Policy Schedule (day 1-10) \$40 Additional after day 10
In-Hospital Special Nursing....	No lifetime maximum	Up to \$150 per day
In-Hospital Attending Physician.....	No lifetime maximum	Up to \$30 per day
Blood & Plasma..... not replaced by donors	No lifetime maximum	100%
Ambulance.....	No lifetime maximum	100%
Radiation Therapy & Chemotherapy Drugs..... (excluding lab tests and diagnostic X-rays)	No lifetime maximum	100%
New or Experimental Treatment..	Same as any other treatment	
Transportation..... to nearest hospital providing prescribed specialized treatment	No lifetime maximum	100% for commercial carrier \$.30 per mile for personal car

Prosthesis.....	Maximum of \$2,000	Up to \$1,000 each
Surgical Expense.....	Maximum \$3,000 for surgery Maximum \$750 for anesthesia per operation	See schedule in policy
Waiver of Premium.....	After 90 continuous days of disability due to cancer	
Hospice.....	Maximum \$9,000 lifetime	Up to \$50 per day
when treatment no longer prescribed and life expectancy less than 6 months		

(The following benefits are in lieu of all other benefits under the policy.)

Extended	No lifetime maximum	100% Hospital charges (day 76 and after)
Government Hospital Confinement.....	No lifetime maximum	\$300 per day

(4) **Exclusions, Limitations, and Reductions** - Benefits are provided only for actual expenses incurred. Such expenses will consist of the actual charges by the Hospital, Physician or other providers subject to the limitations stated in the policy.

The policy covers only expenses resulting from treatment for Cancer and other conditions or diseases directly caused or aggravated by Cancer or the treatment of Cancer. Such Cancer must be diagnosed 30 days or more after the date of issue of the policy.

No benefits will be paid for treatment received outside the United States or its territories.

(5) **Renewability** - This policy is guaranteed renewable for life as long as premiums are paid when due. We reserve the right to change premium rates. Any change in premium rates will apply to all policies of the same class in your state of residence.

®

Life, Accident & Health, Annuity, Credit Transmittal Document

1.	Prepared for the State of	Arkansas					
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2.	Department Use Only						
	State Tracking ID						

3.	Insurer Name & Address	Domicile	Insurer License Type	NAIC Group #	NAIC #	FEIN #	State #
	Protective Life Insurance Co. P.O. Box 2606 Birmingham, AL	TN	Health	458	68136	63-0169720	

4.	Contact Name & Address	Telephone #	Fax #	E-mail Address
	Bonnie Albritton P.O. Box 851857 Richardson, TX 75085-1857	972 850-0850	972 850-0851	balbritton@lewisellis.com

5.	Requested Filing Mode	<input checked="" type="checkbox"/> Review & Approval <input type="checkbox"/> File & Use <input type="checkbox"/> Informational <input type="checkbox"/> Combination (please explain): _____ <input type="checkbox"/> Other (please explain): _____		
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6.	Company Tracking Number	0289:201001
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7.	<input checked="" type="checkbox"/> New Submission <input type="checkbox"/> Resubmission	Previous file # _____
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8.	Market	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Franchise	
		Group	<input type="checkbox"/> Small <input type="checkbox"/> Large <input type="checkbox"/> Small and Large <input type="checkbox"/> Employer <input type="checkbox"/> Association <input type="checkbox"/> Blanket <input type="checkbox"/> Discretionary <input type="checkbox"/> Trust <input type="checkbox"/> Other: _____

9.	Type of Insurance	H071 Individual Health- Specified Disease – Limited Benefit
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10.	Product Coding Matrix Filing Code	H071.002A
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11.	Submitted Documents	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <input type="checkbox"/> FORMS <input type="checkbox"/> Policy <input type="checkbox"/> Application/Enrollment <input type="checkbox"/> Schedule of Benefits </div> <div style="width: 33%;"> <input type="checkbox"/> Outline of Coverage <input type="checkbox"/> Rider/Endorsement <input type="checkbox"/> Other </div> <div style="width: 33%;"> <input type="checkbox"/> Certificate <input type="checkbox"/> Advertising </div> </div> Rates <input type="checkbox"/> New Rate <input checked="" type="checkbox"/> Revised Rate		
		<input type="checkbox"/> FILING OTHER THAN FORM OR RATE: Please explain: _____		
		<u>SUPPORTING DOCUMENTATION</u> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Association Bylaws <input type="checkbox"/> Statement of Variability <input checked="" type="checkbox"/> Actuarial Memorandum <input type="checkbox"/> Other _____ </div> <div style="width: 50%;"> <input checked="" type="checkbox"/> Third Party Authorization <input type="checkbox"/> Trust Agreements <input type="checkbox"/> Certifications </div> </div>		

12.	Filing Submission Date	08/31/2010	
13	Filing Fee (If required)	Amount	<u>\$50.00</u>
		Check Date	<u>N/A</u>
		Retaliatory <input type="checkbox"/> Yes <input type="checkbox"/> No	Check Number <u>N/A</u>
14.	Date of Domiciliary Approval	07/29/2010	
15.	Filing Description:		
	Rate increase for supplemental cancer policies providing coverage for cancer related expenses, including unlimited radiation & chemotherapy.		

16.	Certification (If required)
I HEREBY CERTIFY that I have reviewed the applicable filing requirements for this filing, and the filing complies with all applicable statutory and regulatory provisions for the state of <u>Arkansas</u> .	
Print Name <u>Bonnie Albritton</u> Title <u>Consulting Actuary</u>	
Signature <u>Bonnie Albritton</u> Date: <u>8/31/2010</u>	

17.	Form Filing Attachment
This filing transmittal is part of company tracking number	
This filing corresponds to rate filing company tracking number	

	Document Name	Form Number		Replaced Form Number
	Description			Previous State Filing Number
01			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
02			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
03			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
04			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
05			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
06			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
07			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
08			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
09			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
10			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	

LH FFA-1

18.	Rate Filing Attachment			
This filing transmittal is part of company tracking number				
This filing corresponds to form filing company tracking number				
Overall percentage rate indication (when applicable)				
Overall percentage rate impact for this filing			25.0%	
	Document Name	Affected Form Numbers		Previous State Filing Number
	Description			
01	Rates	CA05	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request + <u>25.0</u> % - ____% <input type="checkbox"/> Other _____	
02	Rates	CA06	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request + <u>25.0</u> % - ____% <input type="checkbox"/> Other _____	
03	Rates	CA08	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised Request + <u>25.0</u> % - ____% <input type="checkbox"/> Other _____	
04			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
05			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
06			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
07			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
08			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
09			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
10			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	

LH RFA-1

Dallas

Glenn A. Tobleman, F.S.A., F.C.A.S.
S. Scott Gibson, F.S.A.
Cabe W. Chadick, F.S.A.
Michael A. Mayberry, F.S.A.
Steven D. Bryson, F.S.A.
Gregory S. Wilson, F.C.A.S.
David M. Dillon, F.S.A.
Bonnie S. Albritton, F.S.A.
Brian D. Rankin, F.S.A.
Sarah A. Hoover, F.S.A.
Wesley R. Campbell, F.S.A.
Jacqueline B. Lee, F.S.A.
Robert E. Gove, A.S.A.
J. Finn Knox-Seith, A.S.A.
Robert B. Thomas, Jr., F.S.A., C.F.A. (Of Counsel)

**Kansas City**

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Christopher H. Davis, F.S.A.
Thomas L. Handley, F.S.A.
Anthony G. Proulx, F.S.A.
Karen E. Elsom, F.S.A.
Jill J. Humes, F.S.A.

London / Kansas City

Roger K. Annin, F.S.A.
Timothy A. DeMars, F.S.A.
Scott E. Morrow, F.S.A.

September 14, 2010

Ms. Rosalind Minor
Arkansas Insurance Department
1200 W 3rd Street
Little Rock, Arkansas 72201-1904

Re: Protective Life Insurance Company
Rate Increase Filing – Cancer Policy Forms CA03, CA04, CA05, CA06, and CA08
State Tracking # 46674
SERFF Tracking # LWLL-126773344

Dear Ms. Minor,

This is in response to your objection letter dated September 09, 2010.

You indicated in your letter that the Department is concerned about the past rate increases and the impact of rate increases on policyholders in the current economic climate. We understand and appreciate your concerns. However, we respectfully ask you to reconsider the requested 25% increase. We ask you to keep in mind that these supplemental policies have unlimited radiation and chemotherapy benefits, for which the trends in treatment costs have been much greater than anticipated twenty years ago, when the products were priced. The past losses have been significant and we expect these significant losses to continue into the foreseeable future.

Based on the projected loss ratios, we believe that the 25% rate increase is actuarially justified. In fact, a significantly larger increase is justified, but Protective has chosen to limit the increase, in an effort to minimize the impact on policyholders.

We have attached an exhibit showing the average annual trend increases and the average nationwide rate increases implemented in each year, along with the cumulative trend and rate increases. As you can see the cumulative rate increases have been significantly lower than the cumulative trend.



Mailing Address: Post Office Box 851857 • Richardson, Texas 75085-1857
2929 N Central Expressway, Suite 200 • Richardson, TX 75080 • 972-850-0850 • FAX: 972-850-0851



Page Two
September 14, 2010
Rosalind Minor

You will also see at the bottom of the exhibit, the five-year average annual trend, which is about 24%. In our projections, we assumed a future trend rate of 20%. Therefore, the Department's proposed 15% rate increase is lower than the 2011 anticipated trend.

We understand that rate increases, not only in insurance but in any sector of the economy given the current national and local economic environment, are both difficult to request and difficult to grant. In this regard, we note that less costly alternatives are available to policyholders, which still provide policyholders with valuable chemotherapy and radiation cancer treatment benefits. Since 2001, Protective has offered benefit reductions to most unendorsed policyholders in exchange for lower premiums. Protective continues to offer six different endorsements in an effort to help some policyholders reduce and stabilize their premium payments:

- CE-21 and CE-21A limit radiation and chemotherapy benefits to \$10,000 per insured per calendar year;
- CE-33 and CE-33A limit radiation and chemotherapy benefits to \$100,000 per insured during first service year and \$30,000 per insured during each subsequent service year; and
- CE-34 and CE-34A limit radiation and chemotherapy benefits to \$50,000 per insured per service year.

We appreciate your further consideration of this filing. Please let us know if you have any questions.

Regards,



Bonnie S. Albritton, F.S.A., M.A.A.A.
Vice President & Principal

Cumulative Medical Trend vs. Cumulative Rate Increases

Unlimited Radiation & Chemotherapy Plans

Forms CA03, CA04, CA05, CA06, and CA08 without Endorsements

Nationwide without Florida

Year	Average Claim per Policy	Annual Increase in Claims	Cumulative Claim Increase	Average Premium Increase	Cumulative Rate Increase
1988	46.70				
1989	48.85	4.6%	4.6%	0.0%	0.0%
1990	70.65	44.6%	51.3%	0.0%	0.0%
1991	93.51	32.4%	100.2%	0.0%	0.0%
1992	112.43	20.2%	140.7%	12.9%	12.9%
1993	114.70	2.0%	145.6%	0.0%	12.9%
1994	138.77	21.0%	197.1%	19.7%	35.2%
1995	151.91	9.5%	225.3%	0.0%	35.2%
1996	195.30	28.6%	318.2%	26.0%	70.4%
1997	240.64	23.2%	415.3%	0.0%	70.4%
1998	317.50	31.9%	579.9%	25.7%	114.2%
1999	377.60	18.9%	708.6%	23.9%	165.5%
2000	466.34	23.5%	898.6%	28.9%	242.2%
2001	573.42	23.0%	1127.9%	39.7%	378.2%
2002	806.44	40.6%	1626.8%	25.8%	501.7%
2003	971.88	20.5%	1981.1%	36.4%	720.6%
2004	1,156.99	19.0%	2377.5%	22.9%	908.2%
2005	1,388.57	20.0%	2873.4%	25.3%	1162.8%
2006	1,659.60	19.5%	3453.7%	16.8%	1375.5%
2007	2,386.59	43.8%	5010.4%	26.7%	1769.4%
2008	3,109.00	30.3%	6557.3%	30.7%	2342.4%
2009	3,997.63	28.6%	8460.2%	41.5%	3356.7%
Jun-2010	2,653.19	-14.7%	7205.2%	33.3%	4506.4%

Average Medical Trend (excluding aging trend)

Arithmetic Average (5-year) 24.4%

Geometric Average (5-year) 24.1%

Assumptions Used in Projections 20.0%

<i>SERFF Tracking Number:</i>	<i>LWLL-126773344</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Protective Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46674</i>
<i>Company Tracking Number:</i>	<i>0289201001</i>		
<i>TOI:</i>	<i>H071 Individual Health - Specified Disease - Limited Benefit</i>	<i>Sub-TOI:</i>	<i>H071.002A Dread Disease - Cancer Only</i>
<i>Product Name:</i>	<i>Individual Cancer</i>		
<i>Project Name/Number:</i>	<i>Individual Cancer/0289201001</i>		

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
08/31/2010	Rate and Rule	CA05 Rate Sheets	10/14/2010	CA05 Rate Sheets - AR.pdf (Superceded)
08/31/2010	Rate and Rule	CA06 Rate Sheets	10/14/2010	CA06 Rate Sheets - AR.pdf (Superceded)
08/31/2010	Rate and Rule	CA08 Rate Sheets	10/14/2010	CA08 Rate Sheets - AR.pdf (Superceded)

**Arkansas
Cancer Policy CA-05
Current Rates**

Payroll Deduction Monthly Rates

	Individual	Family
All ages	\$477.36	\$847.77

Direct Monthly Rates

Issue Age	Individual	Family
under 46	\$521.71	\$912.99
46-59	652.13	1,239.05
60-70	1,194.71	2,282.47

Association Monthly Rates

	Individual	Family
All ages	\$521.71	\$912.99

Arkansas

Cancer Policy CA-05

Proposed Rates with a 25% increase

Effective 3/1/2011

Payroll Deduction Monthly Rates

	Individual	Family
All ages	\$596.70	\$1,059.72

Direct Monthly Rates

Issue Age	Individual	Family
under 46	\$652.13	\$1,141.23
46-59	815.17	1,548.82
60-70	1,493.39	2,853.09

Association Monthly Rates

	Individual	Family
All ages	\$652.13	\$1,141.23

**Arkansas
Cancer Policy CA-06
Current Rates**

Monthly Rates

Issue Age	Individual	Family
55 & over	\$118.45	\$229.79

Arkansas
Cancer Policy CA-06
Proposed Rates with a 25% increase
Effective 3/1/2011

Monthly Rates

	Individual	Family
55 & over	\$148.06	\$287.23

**Arkansas
Cancer Policy CA-08
Current Rates**

Payroll Deduction Monthly Rates

		Daily Hospital Benefit			
		\$120	\$220	\$320	\$420
Individual	All ages	\$451.89	\$514.15	\$575.65	\$637.90
Family	All ages	764.28	876.79	989.29	1,101.80

Direct Monthly Rates

		Daily Hospital Benefit			
		\$120	\$220	\$320	\$420
Individual	Issue Age				
	under 46	\$451.89	\$514.15	\$575.65	\$637.90
	46-59	570.02	645.03	720.03	795.03
	60-70	1,038.42	1,179.05	1,319.68	1,460.31
Family	under 46	\$764.28	\$876.79	\$989.29	\$1,101.80
	46-59	1,038.42	1,179.05	1,319.68	1,460.31
	60-70	1,908.08	2,166.84	2,425.61	2,684.37

**Arkansas
Cancer Policy CA-08
Proposed Rates with a 25% increase
Effective 3/1/2011**

Payroll Deduction Monthly Rates

		Daily Hospital Benefit			
		\$120	\$220	\$320	\$420
Individual	All ages	\$564.87	\$642.68	\$719.56	\$797.38
Family	All ages	955.35	1,095.99	1,236.62	1,377.25

Direct Monthly Rates

		Daily Hospital Benefit			
		\$120	\$220	\$320	\$420
Individual	Issue Age				
	under 46	\$564.87	\$642.68	\$719.56	\$797.38
	46-59	712.53	806.29	900.04	993.79
	60-70	1,298.03	1,473.81	1,649.60	1,825.39
Family	under 46	\$955.35	\$1,095.99	\$1,236.62	\$1,377.25
	46-59	1,298.03	1,473.81	1,649.60	1,825.39
	60-70	2,385.10	2,708.56	3,032.01	3,355.46